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INSTRUCTIONS: This for appropriate. All further co- indicated unless corrected maintenance fee notification	rrespondence including the below or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and ders and noting) specifying	PUBLICATION FEE (if requification of maintenance fees values a new correspondence address	nired). Blocks 1 through 5 s will be mailed to the current ; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for	
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ANTONELLIT	ERRY, STOUT & K	RAUS LLP			rtificate of Mailing or Tran	•	
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ARLINGTON, VA 22209-3873			8	transmitted to the USI	PTO (571) 273-2885, on the	date indicated below.	
)3/01/2006 HBEYENE2 000	00082 10706922 /	_	1			(Depositor's name)	
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APPLICATION NO.	\}		POST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	<u> </u>	TRAUS.			<u> </u>	L	
10/706,922 11/14/2003			Easton L. Manderson 3023-005A 7650				
TITLE OF INVENTION: S	SURGICAL INTRAMEDUL	LARY IMPLANI	WITH IMPR	OVED LOCKING FOR FIXA	TION OF FRACTURED BO	NE SEGMENTS	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		-\$300	\$1000	03/01/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS]		
SWIGER III, JAMES L		3733		606-062000	,		
,							
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1Antonelli, Terry,				
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 Stout & Kraus, LLP 3				
3. ASSIGNEE NAME ANI	O RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	Γ (print or type)			
PLEASE NOTE: Unless recordation as set forth i	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO?	data will app F a substitute	ear on the patent. If an assign for filing an assignment.	nee is identified below, the	document has been filed for	
(A) NAME OF ASSIGNEE (E			B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Easton L. MANDERSON Ashton, MD							
	e assignee category or catego				orporation or other private gr	roup entity Government	
4a. The following fee(s) are	enclosed:	4b	. Payment of				
				A check in the amount of the fee(s) is enclosed.			
<u> </u>	small entity discount permitte	Payment by credit card. Form PTO-2038 is attached.					
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5. Change in Entity Status	(from status indicated above	:)		- 01 2105			
a. Applicant claims S	SMALL ENTITY status. See	37 CFR 1.27.	☐ b. Applic	ant is no longer claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).	
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Authorized Signature			$\overline{}$	Date Fe	ebruary 28, 2006	5	
Typed or printed name_	ALfred A. St	adnicki		Registration	No. 30,226		
This collection of informati	on is required by 37 CFR 1.3	11. The informatio	n is required	to obtain or retain a benefit by	the public which is to file (an	d by the USPTO to process)	

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